

APPLICATION DATA SHEET**Application Information**

Application number:: 01/16/02
Filing Date:: Regular
Application Type:: Utility
Subject Matter::
Suggested classification::
Suggested Group Art Unit::
CD-ROM or CD-R?:: None
Number of CD disks::
Number of copies of CDs::
Sequence submission?:: Yes
Computer Readable Form (CRF)?:: Yes
Number of copies of CRF:: 1
Title :: INHIBITION OF INTERLEUKIN-1- β
SECRETION BY CARD PROTEINS
Attorney Docket Number:: 480140.474
Request for Early Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure:: 1
Total Drawing Sheets:: 7
Small Entity?:: Yes
Petition included?:: No
Petition Type::
Licensed U.S. Gov't Agency::
Contract or Grant No:: AG14357
Secrecy Order in Parent Appl.?:: No

First Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Regular
Given Name:: Emad
Middle Name:: S
Family Name:: Alnemri
Name Suffix::
City of Residence:: Ambler
State or Province of Residence:: PA
Country of Residence:: US
Street of mailing address:: 805 Meetinghouse Road
City of mailing address:: Ambler
State or Province of mailing address:: PA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 19002

Second Applicant Information

Applicant Authority Type::
Primary Citizenship Country::
Status::
Given Name::
Middle Name::
Family Name::
Name Suffix::
City of Residence::
State or Province of Residence::
Country of Residence::
Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::

Third Applicant Information

Applicant Authority Type::

Primary Citizenship Country::

Status::

Given Name::

Middle Name::

Family Name::

Name Suffix::

City of Residence::

State or Province of Residence::

Country of Residence::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::

Fourth Applicant Information

Applicant Authority Type::

Primary Citizenship Country::

Status::

Given Name::

Middle Name::

Family Name::

Name Suffix::

City of Residence::

State or Province of Residence::

Country of Residence::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::

Correspondence Information

Correspondence Customer Number :: **00500**

Representative Information

Representative Customer Number::		00500
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Domestic Priority Information

Application ::	Continuity Type::	Parent Application::	Parent Filing Date::
This application is	Non-provisional <input checked="" type="checkbox"/>	60/340,161	12/14/01
This application is	Non-provisional <input checked="" type="checkbox"/>	60/262,477	01/16/01

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee name::	
Street of mailing address::	
City of mailing address::	
State or Province of mailing address::	
Country of mailing address::	
Postal or Zip Code of mailing address::	

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